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CONFIRMATION NO. 9326

<b>SERIAL NUMBER</b> 10/522,766	<b>FILING OR 371(c) DATE</b> 02/27/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> 29287
<b>APPLICANTS</b> Daphne Atlas, Jerusalem, ISRAEL; Eldad Melamed, Tel Aviv, ISRAEL; Daniel Offen, Kfar HaRoe, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL03/00635 07/31/2003 which claims benefit of 60/400,114 08/02/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 19
Examiner's Signature _____ Initials _____			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> Martin Moynihan Anthony Castorina 2001 Jefferson Davis Highway Suite 207 Arlington, VA22202				
<b>TITLE</b> Treatment of multiple sclerosis with brain targeted anti oxidant compounds				
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	